


PART B - ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 5 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advanced orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
 <p>ROBERT H. WHISKER PITNEY BOWES INC. WORLD HEADQUARTERS STAMFORD, CT 06926-0700</p>	INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	CO-INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	<input type="checkbox"/> Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/159,058	12/29/89	009	FRAHM, E	218 07/01
First Named Applicant	SILVERBERG, MORTON			

TITLE OF INVENTION
COMBINED PRINTER AND FACSIMILE APPARATUS WHICH SCANS USING DIFFERENT SCAN RATES AND DOT SIZES (AS AMENDED)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
2 0612	358-296.000	097	UTILITY	NO	\$1050.00	10/01

3. Further correspondence to be mailed to the following:

Mr. Robert H. Whisker
PITNEY BOWES INC.
World Headquarters
Elmcroft Road
Stamford, CT 06926-0700

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 Robert H. Whisker
2 Melvin J. Scolnick
3 David E. Pitchenik

DO NOT USE THIS SPACE

DS20120	09/24/91	07459058	16-1885	020	142	1,050.00CH
DS20121	09/24/91	07459058	16-1885	020	501	15.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

(2) ADDRESS: (City & State or Country)

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

A. ☐ This application is NOT assigned.☐ Assignment previously submitted to the Patent and Trademark Office.☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed:

☒ Issue Fee ☒ Advanced Order - # of Copies 10

(Minimum of 1)

6b. The following fees should be charged to:

DEPOSIT ACCOUNT NUMBER 16-1885

(Enclose Part C)

☒ Issue Fee ☒ Advanced Order - # of Copies 10☐ Any Deficiencies in Enclosed Fees

(Minimum of 1)

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

(Date)

Robert H. Whisker Sept 10, 92

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.